



GLOSSOP URBAN SANITARY
AUTHORITY.

ANNUAL REPORT
OF THE
Medical Officer of Health
(E. H. Marcus Milligan, M.D., D.P.H.),
AND OF
The Sanitary Inspector
FOR THE YEAR 1928.



GLOSSOP PRINTERS LIMITED
TELEPHONE, 67.

HEALTH AND ISOLATION HOSPITAL COMMITTEE.

Chairman: Councillor R. Sellers.

Vice-Chairman: Councillor S. T. Ashton.

Members:

Alderman J. Platt, Alderman G. Wharmby,
Alderman J. E. Buckley.

The Mayor (Alderman J. D. Doyle, J.P.)

Councillors:

H. Brown,	G. Platt,	G. Kinder,
J. H. Cuthbert	R. A. Beckmann,	T. Farnsworth.
A. Mellor,		

MATERNITY AND CHILD WELFARE COMMITTEE.

Chairman: Councillor A. Mellor.

Vice-Chairman: Alderman S. Bamforth.

Members:

Alderman W. Jackson.

The Mayor (Alderman J. D. Doyle, J.P.)

Councillors:

H. Brown,	A. Leech,	W. Wilde,
J. H. Cuthbert,	T. H. Robinson,	J. King,
R. A. Beckmann,	T. Farnsworth,	G. Kinder,

and the following co-opted members:—

Mrs. Jackson,	Mrs. Leatherbarrow,	Mrs. Wray,
Mrs. Hinchliffe, J.P.	Mrs. McMinn,	Mrs. Wilde.
Mrs. Byrom,		

HEALTH DEPARTMENT STAFF.

+Medical Officer of Health, School Medical Officer, Medical Superintendent Isolation Hospital, Medical Officer Infant Welfare Centre, Police Surgeon:

E. H. Marcus Milligan, M.D., D.P.H., L.R.C.P., and S., B.Ch., B.A.O.

Sanitary Inspector, Meat Inspector, and Inspector under the Food and Drugs Acts and Dairies and Cowsheds Orders:

Harry Dane, Cert. R.S.I., M.S.I.A.

Health Visitors and School Nurses:

Mrs. A. E. Austin (fully trained), C.M.B. certificate; Miss B. Coventry (general training), C.M.B. certificate, and Cert. R. San. Inst. for Health Visitor.

Gamesley Isolation Hospital:

Master and Matron, Mr. and Mrs. G. Hornby.

Clerks, Miss Moore, Miss Anderton. Dental Clerk, Miss E. Pearson.

+The M.O.H. is also M.O.H. of Glossop Dale Rural District and an Assistant S.M.O. Derbyshire C.C.

Glossop Urban Sanitary Authority.

ANNUAL REPORT OF THE Medical Officer of Health.

HEALTH DEPARTMENT,
MUNICIPAL BUILDINGS,
GLOSSOP,
MAY, 1929.

*To the Ministry of Health and the Chairman and Members
of the Health, Maternity and Child Welfare and Hospital
Committees of the Borough of Glossop.*

LADIES AND GENTLEMEN,

I submit herewith my Ninth Annual Report on the Health of the Borough; this report is an ordinary one as required by the Ministry of Health.

There are certain matters in the body of the report to which I desire to direct special attention. In the first place the Pail Conversion Scheme has been practically completed; there are now only about 100 pails unconverted and some of these are in places where conversion is difficult. The completion of this scheme in addition to being an improvement of great sanitary value has also been one which is helpful to the pockets of the ratepayers as it is more economical to have waste products removed by sewers which were laid down for the purpose than to have them carted in vehicles about the town to the Sewage Works; the amount saved per year as compared with before the scheme was started in 1923 is approximately £1,000 per year.

There is now, however, another big matter which the town must tackle, the provision of houses for overcrowded persons and the dealing with back to back houses (see page 30). The problem may be a difficult one but I have no reason to believe that the Town Council will be unable to deal with it in as business like a way as they have dealt with the conversion of the pails and I ask them to give the matter their earnest attention.

The report gives details of the work carried out by the Health and other Committees and I desire here to thank those by whose voluntary assistance we were enabled to carry out many things which otherwise would have been impossible. The voluntary lady workers at our Welfare Centres and our Sun Ray Clinic have given hours weekly to assist us, the work they do is not easy but it has been well done and cheerfully done; on behalf of the Council I give them the town's thanks.

The Hospital Collection Committee and the Tuberculosis Care Committee have also assisted us and I thank these Committees for their help. The Tuberculosis Care Committee has supplied milk to many persons affected with Tuberculosis and has I am certain done much good.

In conclusion I thank the members of the Town Council for support given me during the year and my brother officials for courtesy and help given me.

The members of my staff I thank for the conscientious discharge of duties which in many cases are onerous and difficult.

I am,

Your obedient servant,

F. H. M. MILLIGAN, M.D., D.P.H.,
Medical Officer of Health.

A.—General Details.

STATISTICS.

Area · Land, 3,033 acres; Water, 17 acres.

Population (1928), 19,640.

Number of Inhabited houses (Census 1921), 5,267; in 1928 (approx.) 5,390.

Number of families or separate occupiers (Census 1921), 5,297.

Rateable value, £113,118.

Sum represented by a penny rate, £450.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	M.		F.		Total.
Live Birth: Legitimate ...	138	...	117	...	245
Illegitimate ...	7	...	6	...	13

Deaths	121	... 136	... 257
Death Rate (R.G.)	13.08	Corrected,	12.3
		(Factor for correction, .946)	
		Infantile Mortality Rate, 77.5	
		Birth Rate, 13.13.	

Number of women dying in, or in consequence of childbirth:

From Sepsis	1
,, other causes	1
Deaths of Infants under one year of age:	
Legitimate	19
Illegitimate	1
Total	20

Deaths from Measles (all ages)	0
,, Whooping Cough (all ages)	0
,, Diarrhoea (under 2 years of age)	1
,, Diphtheria	1
,, Scarlet Fever	0
,, Enteric	0
,, Smallpox	0
,, Influenza	7
,, Encephalitis Lethargica	1

PRINCIPAL CAUSES OF DEATH, AND DEATH RATES.

	No. of Deaths.	Rate per 1000 Population.
Seven Principal Zymotic Diseases ...	2	0.10
Pulmonary Tuberculosis	4	0.20
Other Tuberculosis	2	0.10
Respiratory Diseases (including Phthisis). .	28	1.42
Cancer	36	1.8
Nephritis	5	0.25
Arterio-Sclerosis	12	0.6
Heart, Blood Vessels and Cerebral Hæmmorrhage, &c.	79	4.2

INFECTIOUS DISEASES NOTIFIED.

	Deaths per 1000 Population.
Diphtheria	0. 0
Scarlet Fever...	0. 0
Enteric	0. 0
Puerperal Fever	0.05
Puerperal Pyrexia	0. 0

Vaccination per cent. of Births in Glossop Union, ~~16.8~~ 19

Stillbirths formed 3.7 per cent. of all births in 1928, there were 10.

TABLE X.—BIRTH RATE, DEATH RATE, and ANALYSIS of MORTALITY during the Year 1928.

Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1928, but those for the towns have been calculated on populations estimated to the middle of 1927. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.

RATE PER 1,000 TOTAL POPULA- TION.	ANNUAL DEATH RATE PER 1,000 POPULATION										RATE PER 1000 BIRTHS	PERCENTAGE OF TOTAL DEATHS.	
	LIVE- BIRTHS	STILL- BIRTHS	All Causes.	Enteric Fever.	Measles.	Scarlet Fever.	Whooping- cough.	Influenza.	Violence.	Total Deaths under 1 yr.	Cases Practitioners	Cases Coroner P.M. after Inquest.	Causes of Death
16.7	0.70	11.7	0.01	0.11	0.00	0.02	0.09	0.09	0.17	7.0	90.9	6.7	1.4
16.9	0.70	11.6	0.01	0.00	0.15	0.02	0.09	0.09	0.48	70	91.0	6.5	1.9
England and Wales ..													0.6
107 County Boroughs and Great Towns, including London ..													
156* Smaller Towns (1921 Adjusted Populations 20,000—50,000)	16.6	0.73	10.6	0.01	0.00	0.08	0.01	0.06	0.08	0.21	0.41	4.8	60
London	15.9	0.53	11.6	0.01	0.00	0.30	0.02	0.09	0.09	0.13	0.55	10.2	67
Glossop	13.13	0.5	113.08	0.0	0.0	0.0	0.0	0.0	0.0	0.35	3.9	77.5	3.1

* By the union of Morecambe M.B. and Heysham U.D. on the 1st October, 1928, the number of Smaller Towns is increased to 156.

Statistics for 1928 and Previous Years.

	Birth Rate.	Zymotic Death Rate.	Death Rate from Enteric Diseases.	Death Rate from Diarrhoeal Diseases.	Phtisis Death Rate.	Respiratory Death Rate.	Infantile Death Rate.
1918—Glossop	...	13·02	...	16·69	...	0·70	...
Average, Urban Districts of Derbyshire.	20·13	...	16·94	...	0·89	...	0·27
1919—Glossop	...	15·37	...	13·92	...	0·14	...
Average, Urban Districts of Derbyshire.	20·38	...	12·66	...	0·42	...	0·10
1920—Glossop	...	...	...	13·24	...	0·28	...
Average, Urban Districts of Derbyshire.	20·01	...	11·96	...	0·79	...	0·15
1921—Glossop	...	...	...	13·7	...	0·33	...
Average, Urban Districts of Derbyshire.	17·8	...	11·26	...	0·55	...	0·14
1922—Glossop	...	...	...	12·9	...	0·38	...
Average, Urban Districts of Derbyshire.	15·6	...	11·05	...	0·40	...	0·14
1923—Glossop	...	...	...	13·22	...	0·29	...
Average, Urban Districts of Derbyshire	20·8	...	10·8	...	0·45	...	0·14
1924—Glossop	...	...	...	15·2	...	0·58	...
Average, Urban Districts of Derbyshire.	14·9	...	11·23	...	0·34	...	0·19
1925—Glossop	...	...	...	13·3	...	0·39	...
Average, Urban Districts of Derbyshire.	14·13	...	11·6	...	0·46	...	0·13
1926—Glossop	...	...	...	14·2	...	0·36	...
Average, Urban Districts of Derbyshire.	13·3	...	10·6	...	0·38	...	0·05
1927—Glossop	...	...	...	13·07	...	0·36	...
Average, Urban Districts of Derbyshire.	13·3	...	11·36	...	0·27	...	0·09
1928—Glossop	...	...	...	*13·08	...	0·1	...
Average, Urban Districts of Derbyshire.	13·13	...	13·08	...	0·05	...	0·05

* Factor for Correction, 946. Corrected Rate, 123.

The opening of the Winter Session of the Medical School will take place at 3 p.m., on Monday, October 2nd, 1916, when Her Royal Highness The Princess Alexander of Teck will distribute the prizes to the Students.

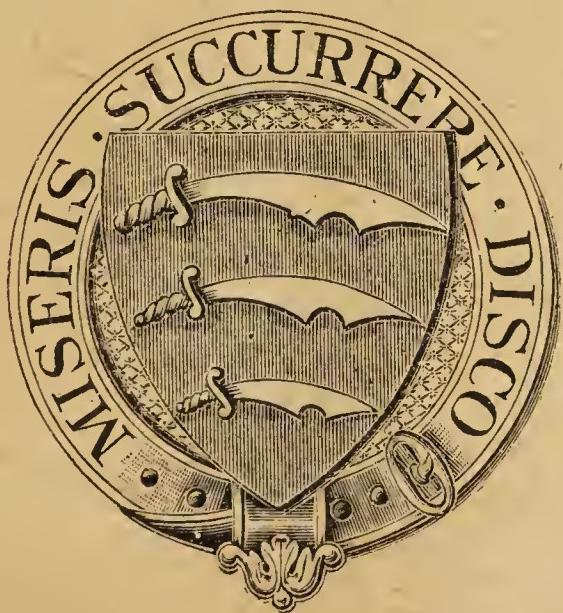
No formal invitations will be issued, but relatives and friends of past, present, and prospective Students of the School will be welcomed.

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THE
Middlesex Hospital
Medical School.

A SCHOOL OF THE
UNIVERSITY OF LONDON.



ABRIDGED PROSPECTUS FOR
SESSION, 1916-17.

THE MIDDLESEX HOSPITAL MEDICAL SCHOOL,

BERNERS STREET, OXFORD STREET,
LONDON, W.

CENTRAL POSITION.

Easy access from all main stations. The Hospital and School are within five minutes' walk of Oxford Circus.

Nearest Stations: *OXFORD CIRCUS* (Bakerloo and Central London Tube Railways). *GOODGE STREET* (Hampstead and Charing Cross Tube Railway). *PORTLAND ROAD* (Metropolitan).

FULLY EQUIPPED

For teaching the entire Medical Curriculum: *vide p. 6.*

ENTRANCE SCHOLARSHIPS.

Open, <i>vide p. 38</i>	..	..	..	..	£100
" "	..	..	..	..	£50
" "	..	..	..	..	£25
University					
<i>vide p. 39</i>	..	..	..	..	£50

VALUABLE SCHOLARSHIPS AND PRIZES.

Awarded annually: *vide p. 37.*

CANCER INVESTIGATION DEPARTMENT.

Providing unrivalled opportunities for the study of Cancer.

All communications should be addressed to the *DEAN*, who attends daily at 10 a.m., or may be seen at other times by appointment.

CAUSES OF DEATH.

The total number of deaths in 1928 was 157 and the death rate per thousand 13.68; the chief causes of death are those tabled below.—

Diseases of Heart and Blood Vessels ...	79	...	4.2
Respiratory Diseases (including Phthisis)	28	...	1.42
Cancer ...	36	...	1.8
Acute and Chronic Nephritis ...	5	...	0.25
Zymotic Diseases ...	2	...	0.10

CAUSES OF DEATH IN GLOSSOP M.B., 1928.
(CIVILIANS ONLY).

	M.	F.
All Causes ...	121	136
Enteric Fever ...	—	—
Small-pox ...	—	—
Measles ...	—	—
Scarlet Fever ...	—	—
Whooping Cough ...	—	—
Diphtheria ...	—	1
Influenza ...	5	2
Encephalitis lethargica ...	1	—
Meningococcal meningitis ...	—	—
Tuberculosis of respiratory system	3	1
Other tuberculous diseases ...	1	1
Cancer, malignant disease ...	15	21
Rheumatic fever ...	—	—
Diabetes ...	2	3
Cerebral haemorrhage, &c. ...	6	10
Heart disease ...	20	31
Arterio-sclerosis ...	9	3
Bronchitis ...	2	6
Pneumonia (all forms) ...	6	5
Other respiratory diseases ...	3	2
Ulcer of stomach or duodenum ...	—	—
Diarrhoea, &c. (under 2 years) ...	1	—
Appendicitis and typhlitis ...	—	1
Cirrhosis of liver ...	—	1
Acute and chronic nephritis ...	2	3
Puerperal sepsis ...	—	1
Other accidents and diseases of pregnancy and parturition ...	—	1
Congenital debility and malformation, premature birth ...	8	3
Suicide ...	2	2
Other deaths from violence ...	8	1
Other defined diseases ...	25	36
Causes ill-defined or unknown ...	2	1
Special Causes (included above)		
Poliomyelitis ...	—	—

	M.	F.
Polioencephalitis	1	—
Deaths of Infants under one year,		
Total	13	7
Illegitimate	1	—
Total Births	135	123
Legitimate	128	117
Illegitimate	7	6
Population, 19,640.		

The chief causes of death are still Diseases of the Heart and Blood Vessels, Respiratory Diseases and Cancer.

RESPIRATORY DISEASES.

The table below gives the number of deaths (including Phthisis) from Respiratory Diseases since 1912:—

1912	77
1913	87
1914	63
1915	76
1916	68
1917	77
1918	84
1919	65
1920	64
1921	65
1922	52
1923	57
1924	68
1925	63
1926	63
1927	37
1928	28

The death rate from Respiratory Diseases in Glossop, as compared with the rate in England and Wales, will be seen by the following comparison:—

All Respiratory Diseases, Death Rates (Bronchitis and Pneumonia, etc., Phthisis).

	Glossop per thousand.	England and Wales per thousand.
Ten years ending 1921	3.59 . . .	2.50
Year ending 1922	2.40 . . .	3.03
,, 1923	2.75 . . .	2.55
,, 1924	3.3 . . .	2.9
,, 1925	3.17 . . .	2.8
,, 1926	3.2 . . .	2.5
,, 1927	1.90 . . .	2.7
,, 1928	1.42 . . .	—

DEATHS FROM RESPIRATORY DISEASES.

There has been a considerable drop in the number of deaths from diseases of the Lungs during the past two years though I fear the Influenza and Pneumonia outbreak early this year (1929) will put the numbers up again. The death rate from respiratory diseases (including Phthisis) for the five years ending 1926 was 2.9, in 1926 it was 1.9, in 1927 1.9, and 1928 1.42.

Bronchitis and Pneumonia are the greatest killers; last year there were 8 deaths from Bronchitis and 11 from Pneumonia.

In a table which I append the number of deaths at different ages is given, and it will be seen from this table that whereas in Bronchitis the deaths occur nearly all between the years of 45 and 75, Pneumonia occurs at any age. Pneumonia is essentially an infection; in Bronchitis there is probably some other factors as well as infection; Pneumonia is preventable and is caused largely by droplet infection. There are other diseases such as Influenza, Infectious Colds, Diphtheria, Measles, Whooping Cough, etc., which are caused in a similar way, and I think the time has now come when the community should possess greater powers for dealing with these diseases; indeed the public are beginning to demand their prevention and for greater action by the Health Authority. There was in one of the newspapers recently a very pertinent question as to what the Medical Profession were going to do to prevent these recurring epidemics of Influenza and Pneumonia.

The diseases as I have said are caused by droplet infection and the remedy is better ventilation of all places where the public foregather as well as more discretion by members of the public of keeping away from such places when ill.

What steps are there that a Health Authority would take? At present I think our powers are insufficient and what I believe we need is this:—

All places where the public gather together, including places of public meeting, concerts, dances, picture houses, churches, schools, public vehicles, etc., should be adequately ventilated (when the public are there), and if they are not they should be considered as a nuisance in the statutory sense and there should be a heavy penalty for causing such a nuisance. For the purpose of enforcing the law Medical Officers of Health and their assistants should have power of entry and it should be the obligation of the Sanitary Authority to have the necessary inspections carried out and to report yearly on what nuisances were found and the steps taken in dealing with them.

Influenza even if it costs money should be notifiable and the Health Authorities Officers should have power to deal with persons who wantonly expose themselves when in an infectious state.

Action on these lines I feel sure would help to mitigate respiratory and other diseases due to *“droplet” infection.

* Droplet infection is infection caused by the fine spray thrown into the air when one coughs, sneezes or even talks loudly.

PULMONARY TUBERCULOSIS.

Now coming to Tuberculosis; Tuberculosis of the lungs, as will be seen from the figures given below, has been one of the most formidable diseases in our town.

The death rate from Pulmonary Tuberculosis itself in Glossop, as compared with England, will be seen by the following figures:—

Death Rates, Pulmonary Tuberculosis, per thousand.

England

	and Wales.	Derbyshire.	Glossop.
1891-1900	.137	.107	.201
1901-1910	.115	.79	.129
1911-1920	.115	.69	.95
1921-1925	.85	.58	.65

Urban districts.

1922	.88	.64	.45
1923	.83	.58	.62
1924	.84	.62	.48
1925	.83	.68	.89
1926	.77	.58	.71
1927	.79	.54	.25
1928	—	—	.2

PULMONARY TUBERCULOSIS.

It is gratifying to note that our death rate from this disease continues low being .2 as compared with about .7 for England and Wales. Glossop used to be a hot-bed of consumption and for the ten years ending 1900 the death rate was nearly 8 times what it is now and over 50% higher than the rate for England and Wales. The steps taken here for dealing with it were given on page 12 of last year's report.

DISEASES OF THE HEART AND BLOOD VESSELS
 (Including Cerebral Haemorrhage).

The death rate in Glossop from the above diseases, as compared with that in England and Wales, is given below:—

	Glossop.	England and Wales.
1920	1.9	—
1921	2.4	2.4
1922	3.7	2.6
1923	3.4	2.6
1924	4.25	2.7
1925	4.3	2.8
1926	2.8	2.8
1927	3.7	3.13
1928	4.2	—

If Respiratory Diseases show a decrease, deaths from diseases of the Heart and Blood vessels appear to be increasing if anything.

The rate for Glossop for the 8 years ending 1928 is 3.59, and for England and Wales (for the 8 years ending 1927) 2.6.

As will be seen by the attached table the death rate from these diseases is high;—the death rate for the five years ending 1925 was 3.5; for 1926,—2.8; 1927,—3.7; and 1928,—4.2.

The rate for England and Wales for the seven years ending 1926 was 2.5. Glossop's death rate from these causes is therefore about 50% greater. For the administrative County of Lancashire the rate in 1926 was 2.6, for the County Borough of Oldham 3.7, and for Ashton-under-Lyne 3.5. It would appear therefore that in cotton spinning and weaving areas like Oldham, Ashton-under-Lyne and Glossop that there is a high death rate from these diseases.

This is a matter that requires investigation and it is one that I think is quite as well worth going into as the question of Ultra Violet light as this group is by a long way the greatest of our killers or what Sir George Newman might call a very generalissimo of the armies of death. In the meantime I think we might safely say that rest periods during work would help to lessen the mortality as well also as attention to diet and general bodily habits.

As regards diet I think the important matter is a lessening of intake of both solid and liquid food with strict attention to its elimination.

Causes of Death of Children under 1 year.

CAUSE OF DEATH		Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total Deaths under 1 year.
Smallpox ...	...	...	...	...	...	...	...	...	...	...	...
Chickenpox	...	...	...	...	...	...	...	...	...	...	...
Measles ...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...
Diphtheria & Croup	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...
Phthisis ...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	1	...	1h	...	2	...	...	...	...	2
Laryngitis	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...	...
Pneumonia (all forms)	...	...	...	...	...	1	...	1h	1h	1h	3
Diarrhoea	...	...	...	...	...	...	...	...	...	...	...
Enteritis ...	...	...	...	...	...	...	...	...	...	...	...
Gastritis ...	...	...	...	...	...	...	...	...	...	...	...
Syphilis ...	...	...	...	...	...	...	...	...	...	...	...
Rickets ...	...	...	...	...	...	...	1h	...	...	...	1
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...
Injury at Birth ...	1h	1	...	...	...	2	...	...	...	...	2
Atelectasis	...	1	...	...	...	1	...	...	...	...	1
Congenital Mal-formations ...	1h	1	...	...	2	...	...	...	...	...	2
Premature Birth	2	...	1	...	3	1	...	...	...	...	4
Atrophy, Debility, and Marasmus	1	...	...	...	1	1	...	...	...	...	2
Icterus Neonatorum ...	...	...	...	...	...	...	...	...	...	...	...
Influenza ...	...	...	...	...	...	...	...	...	1	...	1
Stenosis of Bile Ducts	...	...	...	...	...	...	1	...	...	...	1
Cardiac Failure	1h	...	...	...	1	...	...	...	...	...	1
Totals	...	9	1	2	0	12	4	1	2	1	20

h = deaths in Hadfield Ward.

NOTIFICATION OF BIRTHS' ACT AND WORK OF THE
MATERNITY AND CHILD WELFARE CENTRES.

The following are the details of the work during the year:

Live birth	258
Stillborn	10
Ophthalmia Neonatorum	0
Total Deaths under 1 year	20
First visits paid to notified cases (including Stillbirths)	276
Partington Maternity Home (including a few cases from outside)	63
Mothers died at Childbirth	2
Revisits	3,892
Visits under one year	1,475
,, over one year	2,417
(Ante Natal Visits .. 64)	
Total visits	3,956

CHILD WELFARE CENTRES.

	Glossop Central.	Hadfield.
New Members	175	45
Total attendance of Infants	3,992	913
Average attendance	81	36
New Babies seen by Doctor	158	40
Total examinations by Doctor	636	195
No. of attendances under one year	2,351	441
No. of attendances over one year	1,641	472
(Ante Natal Attendances .. 9)		
Specimens of Urine Examined	193	
Grand total Attendances for both Centres	4,905	

TABLE SHOWING CAUSE OF DEATHS OF INFANTS
UNDER 1 YEAR FOR THE 9 YEARS ENDING 1928.

Influenza	2
Whooping Cough	8
Meningitis	—
Convulsions	18
Bronchitis	10
Pneumonia	25
Diarrhoea	2
Enteritis	14
Gastritis	5
Congenital Malformations	13
Premature Birth	25
Atrophy, Debility and Marasmus	26
Syphilis	7
Atelectasis	3
Diphtheria	1

Measles	3
Tuberculosis other than Lungs	4
Injury at Birth	6
Overlaying	1
Epilepsy	1
Umbilical Hemorrhage	1
Other Diseases	12
<hr/>	
Total Number of Deaths	187
No. of Births for the 9 years	2845
Infantile Mortality Rate for the 9 years	65.7

PARTINGTON MATERNITY AND CONVALESCENT HOME.
YEARLY REPORT.

- | | | |
|------|---|---------|
| (1) | Total of cases admitted | 65 |
| (2) | Average duration of stay | days 14 |
| (3) | Number of cases delivered by— | |
| | (a) Midwives | 38 |
| | (b) Doctors | 25 |
| | Sent to Hospitals | 2 |
| (4) | Number of cases in which medical assistance was sought by the Midwife with reasons for requiring assistance... | 17 |
| | (a) Delayed labour. 6; torn perinæum, 4; | |
| | (b) Unable to diagnose, 1. | |
| | (c) Retained placenta, 2: | |
| | (d) Headache, P.P.H., feeble baby, 1. | |
| | (e) For infants. slight discharge of R. eye, 1; septic finger, 1; premature, 1. | |
| (5) | Number of cases notified as puerperal sepsis, with result of treatment of each case (Convalescent) | 1 |
| (6) | Number of cases in which temperature rose above 100.4 for 24 hours, with rise of pulse rate, puerperal pyrexia | 2 |
| (7) | Number of cases notified as Ophthalmia Neonatorum | 0 |
| (8) | Number of cases, Inflammation of the eyes, however slight | 1 |
| (9) | Number of infants not entirely breast fed while in the Institution, with reasons why they were not breast fed; Condition of mother, 3; losing weight, 4 | 7 |
| (10) | Number of maternal deaths | 0 |
| (11) | Number of foetal deaths (stillborn), 1; or within 10 days of birth, etc., 0; deaths of babies, 0 | 1 |
| | 2 Queen's Nurses. | |

Number of visits paid by Queen's Nurses during 1928, 6,753;
Number of different patients visited, 176.

MATERNITY AND CHILD WELFARE.

Our Infantile Mortality rate was 77.5 last year which is a little higher than usual though by no means a bad rate.

For about 7 months of last year we were without our ordinary staff and it was impossible to have as efficient health visiting, this would not tend to keep our infantile rate low. Out of 20 deaths 11 were due to congenital causes, 9 of them occurred during the first week before our visiting staff had a chance of doing anything and 12 during the first month; this emphasises the need for greater ante-natal care.

Ante-Natal care is controlled almost entirely by the midwives and private doctors, we have however issued a leaflet to all midwives regarding such care and also a card on which they are to report the care and attention given to expectant mothers.

A letter has been issued to midwives (early in April, 1929) drawing attention to the advice recommended on the leaflet and also pointing out the advisability of seeing that mothers are properly nourished and take suitable food.

Expectant and Nursing mothers can now obtain dental treatment including sets of teeth and the midwives were informed of this

The Health Visitors have also been requested to try and get Expectant and Nursing mothers to have adequate dental treatment and pay special attention to the dietary both of Nursing mothers and children.

It is hoped therefore that the deaths of infants, especially those occurring shortly after birth, will be avoided by the exercise of ~~such~~ care

We have a Maternity Hospital, with a consulting obstetrician.

We have made arrangements for Puerperal cases to be treated at Ashton Infirmary and the Manchester Hospitals are within easy reach as we have an up-to-date motor ambulance; no mother or child should therefore die of lack of skilled attention. Despite this mothers still die due to causes connected with child-birth.

GLOSSOP'S BIRTH RATE.

Glossop's birth rate has for a long number of years been steadily dropping; for the ten years ending 1900 the rate was

27.03 per thousand, for the ten years ending 1910,—22.04, for the ten years ending 1920,—17.03, for the five years ending 1925,—15.8, and for 1928,—13.13. The number of births and deaths are now about equal, the rates per thousand being: 13.13 and 13.08.

Some years ago the Press was full of paragraphs drawing attention to the low birth rate in France and hinting at race deterioration and racial extinction, the rate in France then was about 18 per thousand; now France's birth rate is a shade higher than England's at 18.8 in 1926 compared with 17.8 for England; our town of Glossop with its birth rate of 13.13 is much lower still.

In some countries of Europe the birth rate is well over 25 per thousand, namely Rumania at 35, Spain 29, Italy 27, Hungary 27; in Germany and the Scandinavian countries the rate is much the same as that in England. It is not my intention in this report to discuss the matter in all its details but our excessively low rate of 13.13 per thousand must make us think; a generation ago Glossop mothers were having twice as many children as nowadays.

Our infant mortality rate of course is very much lower now and on the whole I am sure our children are better cared for and the standard of living is higher. These are all gains but I see no reason why with a somewhat higher birth rate we could not have a low infantile mortality rate for families in Ireland are larger with a low infantile mortality; one thing I am sure of more children would lead to greater family happiness and would tend to the better development of character and discipline; the only child is only too apt to be selfish and self centred. Is the emancipation of woman to be an emancipation from motherhood, and is the most wonderful thing in life, parenthood, and the creating of new lives and the training and bringing up of these helpless little ones to be sentient and intelligent human beings, to be abandoned for other things which are ephemeral uncertain and in the end lacking in satisfaction?

The modern parent, both mother and father, must think this over; the other aspect of the case national decay and the dropping behind of England as compared with other countries is a political not a health question. If England as a whole and the Dominions had Glossop's birth rate of 13.13, while other countries have one of double or nearly double the rate the danger is obvious.

NURSING ARRANGEMENTS.

The Partington Convalescent and Nursing Home (Voluntary Institution) provide 2 Queen's Nurses who give domiciliary attention to the sick poor. The number of visits paid during 1928 was 6,753, and the number of different patients attended was 176.

The Nurses attend cases of Measles and Epidemic Diarrhoea under the Maternity and Child Welfare Scheme of the Borough.

MIDWIVES: There are 7 practising in the Borough, five have the C.M.B. Certificate.

CLINICS AND TREATMENT CENTRES.

VENEREAL DISEASES.

Nil.—There ought to be some arrangements made.

TUBERCULOSIS.

There is a County Council Dispensary in Surrey Street. Sessions every Wednesday morning and evening.

Dr. Heffernan, Tuberculosis Officer, Derbyshire C.C., is the Consultant.

BOROUGH OF GLOSSOP SCHOOL CLINICS.

Tonsils and Adenoids:—Wood's Hospital. Surgeon, Dr. Mary Gallagher

Ultra Violet Ray Clinic:—Municipal Buildings.

Minor Ailments:—School Clinic, Municipal Buildings.

Teeth:—Dental Clinic at the School Clinic, Municipal Buildings. Surgeon, Miss Robertson.

An arrangement has been entered into with Hyde for a whole time dentist.

Eye Clinic:—High Street West. Surgeon, Dr. Peter Malloch.

Orthopædic Clinic (arrangements being made).

From the details which I give it will be seen that Glossop is well supplied with Clinics. To summarise we have the following Clinics:— Minor Ailments, Dental, Eye, Ear Nose and Throat, Ultra Violet Ray and Orthopædic (being established); these belong to the Corporation and are under the control of the M.O.H. who is S.M.O.; all are available for children of school age and for infants and young children under school age. In addition there is the Tuberculosis Dispensary belonging to the Derbyshire C.C.

HOSPITALS.

There is first of all Wood's Hospital with accommodation for 8 males and 8 females with a staff of Matron, Sister and 2 Nurses. The Hospital admits general medical and surgical cases and is just completing an up-to-date Operating Theatre.

The Partington Maternity and Convalescent Home has accommodation for 6 cases and an Isolation Block is now being built.

The Union Infirmary has accommodation for 31 males and 31 female cases and a staff of one Sister and 2 Nurses.

The latter Hospital admits cases from Glossop-Dale Rural District as well as the Borough.

The Infectious Hospital at Gamesley has accommodation for about 20 cases, there are five wards; there is a staff of a Matron and 2 Nurses.

I am of opinion that it would be in the interests of all that there should be a discussion regarding the co-operation of these Hospitals so that they could be used to the best advantage and that overlapping should be avoided. This is an important matter in view of the new Local Government Act which gives the County Council control of Poor Law Hospitals.

The Manchester Hospitals of course are largely used, in fact mainly for serious cases. These Hospitals are: The Manchester Royal Infirmary, Salford Royal, St. Mary's Maternity and Gynæcological), the Children's Hospital, Royal Eye, Ear Hospital, etc., etc.; Ashton Infirmary also is available. The sum of £3,253 was subscribed locally for these and our own Hospitals during the year.

AMBULANCE.

There is an Ambulance—the "Isaac Jackson" Ambulance — at the Police Station, which has been provided by the generosity of the late Mr. Isaac Jackson.

†ULTRA VIOLET RAY CLINIC : DETAILS OF CASES TREATED 1928.

BABIES.

Age.	Sex.	Disease.	No. of Exposures. *K.B.B. Lamp.	Treat- ment.	Length of Maximum Exposure. sure.	Weight.	Result.
2½	F.	Rickets. Tibiae bent.	8	6 weeks.	7 minutes		Improved.
1½	M.	Marasmus	13	7 ,,	9 ,,	7 lbs 6½ oz.—8 lbs 13 oz	Improved.
4½	M.	Rickets. Bending of Tibiae.	14	2 months.	13 ,,		Very little bending; greatly improved.
7½	M.	Marasmus	12	6 weeks.	8 ,,	6 lbs 12½ oz.—8 lbs 7 oz.	Greatly improved.
3½	M.	Nervous crying and twitching after dog bite.	12	6 ,,	9 ,,	1 st 13 lbs ¼ oz— 1 st 13 lbs 1 oz.	Generally improved; sleeps better.
2½	F.	Rickets and Knock Knee	21	3 months.	13 ,,	21 lbs 15 oz—24 lbs 3 oz	Improved ; legs straighter.
2½	M.	Rickets, Knock Knee, Tibiae bent, night terrors.	19	3 ,,	10 ,,	25 lbs 7 oz—26 lbs 8 oz	Legs straightened and no night terrors.
3	M.	Rickets and Knock Knee	21	3 ,,	13 ,,	29 lbs—30¾ lbs	Legs straighter; splint for one leg which allows child to walk.
3½	F.	Nasal and Bronchial Catarrh.	15	3 ,,	6½ ,,	27½ lbs—28 lbs	Bronchial Catarrh better; nose as before. Child developed Pneumonia 3 weeks after treatment and recovered.

* Kelvin Bottomley Baird Lamp.

ULTRA VIOLET RAY CLINIC.
TABLES—Continued.

Age.	Sex.	Disease.	No. of Exposures.	Length of Treatment.	Maximum Exposure.	Weight.	Result.
$\frac{2}{2}$	F.	Splenic Anaemia.	7	$3\frac{1}{2}$ weeks	4 minutes	20 lbs 13 oz—21 lbs 1 oz	No improvement, child died in hospital several months later.
$\frac{5}{2}$	M.	Bronchitis and Malnutrition.	12	$4\frac{1}{2}$ months.	7 , ,	12 lbs 2 oz—14 lbs 9 oz	Child improved during treatment, but took ill in Influenza epidemic 6 weeks after treatment and died.
$1\frac{8}{2}$	M.	Rickets, Knock Knee, Bending of Tibiae.	18	$2\frac{1}{2}$, ,	15 , ,	Legs not straight, further treatment needed	20
$2\frac{1}{2}$	M.	Rickets and Knock Knee.	16	8 weeks.	16 , ,	Legs straighter.	
$3\frac{7}{2}$	M.	Rickets and Knock Knee.	21	$2\frac{1}{2}$ months.	15 , ,	29 lbs—29 $\frac{1}{2}$ lbs	Legs nearly straight.
3	M.	Rickets and Knock Knee.	19	2 , ,	15 , ,	31 lbs 8 oz—31 lbs	Legs much straighter, but not quite straight yet.
$4\frac{2}{2}$	M.	Anæmia and Loss of Appetite	16	2 , ,	15 , ,	2 st 11 $\frac{3}{4}$ lbs—3 st 2 $\frac{1}{2}$ lbs	Improved ; appetite better ; plays about more.
$2\frac{1}{2}$	M.	Rickets and Knock Knee, Flat Foot	21	$2\frac{1}{2}$, ,	15 , ,	29 lbs—29 $\frac{1}{2}$ lbs	Legs straighter.

ULTRA VIOLET RAY CLINIC.

ADULTS.

Age.	Sex.	Disease.	No. of Exposures. † H.J. Lamp.	Length of Maximum Exposure. Treat- ment.	Weight.	Result.
50	M.	Rheumatism, severe pains in Ankles and Elbows	21	4 months. 14 minutes General and Local treatment.	9st 7lbs—9st 11½ lbs	No pains left, feels stronger and walks better.
48	F.	Neuritis of 10 years standing, tried all sorts of treatment	24	3 months. 8 minutes General and Local treatment and Murray Levick Lamp.	21	Greatly improved and no pain.
36	F.	Bronchial Cataarrh and loss of voice	14	1½ months. 15 minutes	6st 6 lbs—6st 12¾ lbs	Voice improved and generally improved.
53	M.	Neuraesthesia, very depressed.	24	2½ , ,	10st 8¾ lbs—11st 4¾ lbs	Feels much better, depressed feeling gone
17	F.	Nervous Dibility and Sleeplessness	18	1½ , ,	7st 10 lbs—8st 4½ lbs	Feels better and stronger; sleeps better.
14	M.	Suspected Phthisis and old infantile Paralysis of Arm and Leg.	17	2½ , ,	4 st 8lbs—4st 11½ lbs	Improved ; Arm and Leg stronger; eats better.
54	F.	Loss of power of Right Arm after Embolus 8 years ago	18	2 , ,	9 , ,	Improved ; paralysis only slight now.
						† Hanovia Jessionek Lamp.

ULTRA VIOLET RAY CLINIC. ADULTS—Continued.

Age. Sex.	Disease.	No. of Exposures. H.J. Lamp.	Length of Treat- ment.	Maximum Exposure. Exp- sure.	Result.	Weight.
18 M.	Alopecia.	7	1 month.	5 minutes Local treatment.	Hair grown on back and sides, top still bare (one month after).	22
— F.	Tubercular Glands of Abdomen.	11	1½ months.	5 minutes	7st 5½lbs—7st 8½lbs Not much better.	
54 F.	Raynauds Disease	5 years ago,	11	1 ", Murray Levick Lamp, 10 exposures of 20 minutes	Ulcers healed, much less pain; blueness only in finger tips.	
— F.	Rheumatism of both Knees; great pain.	16	3 months.	8 minutes General and Local treatment.	Immensely improved; pain greatly relieved. Improved.	
27 F.	Fibrosis of Scapula.	17	2½ months.	8 minutes Murray Levick Lamp also.		
— F.	Nervous Debility.	15	2½ months.	14 minutes Exposed with thin artificial silk garment on.	Feels better.	
35. F.	Rheumatism (general). Pains in Arms and Legs.	· 10 3 months.	5 minutes Irregular attendance.		Pains less, but relapsed 4 months later.	

+ For results of School Children Tested (31) see School Medical Report.

RESULTS OF ULTRA VIOLET RAY TREATMENT.

For the present I desire to say very little about results; the tables I give both in this and in my School Report show results of treatment in 62 cases.

The large majority were in my opinion greatly improved, especially cases of Rickets, Rheumatism and cases of General Debility.

The relief in one case of Raynauds disease was most pronounced; the pain which was almost unbearable being almost banished; in this case and in Rheumatic cases treatment with Red Rays from a Murray Levick lamp was used in conjunction with Ultra Violet; these were all old standing cases which other forms of treatment had failed to relieve.

PUBLIC HEALTH ACTS ADOPTED.

Public Health Acts Amendment Act, 1890, adopted 27th May, 1891.

Infectious Diseases Prevention Act, adopted 28th September, 1892.

Notification of Births Act, 1907.

Public Health Acts, Amendment Act, 1907, parts 2, 3, 4, 5, 6, and Section 95 of part 10, adopted 15th August, 1909.

Public Health Act, 1925.

LABORATORY WORK.

Bacteriological specimens are sent to the County Council Laboratory at Derby, and also to the Public Health Laboratories, Manchester, and also to Messrs. Thresh and Beale, of London.

Samples of milk and food are sent to the Public Analyst, Mr. White, at the County Offices, Derby, and details are as below:—

Official Samples.

Sausages	...	...	...	...	...	...	...	8
Milk	...	...	...	...	...	...	...	1
Jams	...	...	...	...	...	...	...	1
Cream	...	...	...	...	...	...	...	2
Margarine	...	...	...	...	...	...	...	3
Cheese	...	...	...	...	...	...	...	4
Butter	...	...	...	...	...	...	...	8
								—

Informal Samples.	
Sweets and Chocolates	4
Milk	1
Condensed Milk	5
Drugs	1
Margarine	1
Ground Almonds	8
Dried Milk	7
Jams	7
Mincemeat	1
	—
	35

3 samples of Water sent for Analysis. 1 sample of Sausages contained Boric Acid; 1 sample of Cream contained Boric Acid; 1 sample of Food Colouring contained 56% Boric Acid. All vendors warned.

Samples of water were also analysed for lead by the M.O.H., and samples of Milk by the Sanitary Inspector for Milk fats.

I insert table giving the number of specimens sent to the Bacteriological Department, Derby.

Glossop Borough.	Positive.	Negative.
Enteric Fever ...	1	1
Diphtheria ...	1	71
Phthisis ..	3	22
Miscellaneous ...	4	0
Milk for T.B. (inoc.) ordinary	5	31
Do. Tuberculosis		
Order	2	12
Do. (microscopic)	0	8
for Bacterial Count ...	56	0
for B. Coli ...	9	47
	—	—
	81	192

INFECTIOUS DISEASES — 1928.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

I append table giving details of notifications of and removed to hospital of cases of Infectious Disease.

As a matter of routine, cases of Infectious Disease are generally visited by the Sanitary Inspector who reports to the M.O.H. to see if removal to Hospital is desirable.

In the case of Measles under 5 and Poliomyelitis, visits are paid by the Queen's Nurses; in the case of Diarrhoea under 2 years, Ophthalmia Neonatorum and Pneumonia of children, visits are paid by the Health Visitors.

Measles cases can be admitted to our Hospital as well as Scarlet Fever and Enteric.

Diphtheria cases since September, 1926, are now removed to our own Isolation Hospital.

In addition to the usual diseases, Chickenpox, Diarrhoea under 2 years, and Measles under 5 years are notifiable.

Diphtheria serum:—This is given free on request to all doctors on giving the name and address of the person for whom it is requested; it can be obtained at any Police Station, at the Health Department and at the houses of the M.O.H. and Sanitary Inspector.

Diphtheria Immunisation: — Since September, 1926, 303 persons, mainly children, have been immunised by the M.O.H. with or without previous Schick testing; the Hospital staff are also tested and immunised if requested.

In addition about 50 persons have been immunised by private doctors.

During 1928 54 children were immunised by the M.O.H.

The material used is Burroughs Wellcomes Toxoid Antitoxin.

So far, beyond a very occasional redness or swelling of the arm no untoward symptoms have been noticed. One thing I have noticed is this, where a large number of children have been immunised in an area rapidly if Diphtheria has been prevalent in that area the prevalence has ceased.

This is in keeping with the findings of Topley and others, and I think it marks an advance in dealing with Diphtheria outbreaks.

THE INFECTIOUS DISEASES HOSPITAL.

The Borough possesses an Infectious Diseases Hospital at Gamesley just outside the Borough. This Hospital has 2 blocks of 2 wards each, and an isolation ward; it has accommodation for about 20 patients.

The staff consists of a Medical Superintendent who is the M.O.H., a Master and Matron and 2 permanent Nurses and 2 Maids and a part time Laundress.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1925 AND 1924.

PUBLIC HEALTH ACT, 1925, SECTION 62.

No action has been necessary so far under the above Regulations or Act. All persons who died had been notified.

SCHOOL NOTIFICATIONS.

The Head Teachers notify cases of suspected or definite Infectious Disease and these notifications are particularly useful in the cases of Measles and Whooping Cough and also in severe outbreaks of any disease.

BOROUGH OF GLOSSOP.

RAINFALL 1928.

1928.	Inches.	Heaviest Rainfall in 24 hours.	
			Inches.
January	9.59	January 5th	1.10
February	4.85	February 15th	1.15
March	2.27	March 29th	.51
April	1.42	April 3rd	.44
May	1.10	May 19th	.39
June	6.31	June 7th	1.77
July	1.95	July 4th	.36
August	5.30	August 20th	1.03
September	.85	September 26th	.33
October	4.51	October 26th	.77
November	6.97	November	.80
December	3.20	December	.45
<hr/>			
Year's Total 48.32			

I am indebted to the Borough Surveyor, Mr. G. H. Faulds, for these details.

ULTRA VIOLET RADIATION AS MEASURED BY ACETONE METHYLENE BLUE GAUGE

At Glossop Grammar School, 1929.

February: Several exposures were made on bright sunny days but no fading could be detected.

March: Throughout this abnormally sunny month there was a steady average activity of 5 degrees in three days. (Owing to the indiscretion of a temporary cleaner the records were destroyed).

I am indebted to Mr. C. H. Chambers, B.Sc., B.Eng., Head Master of the Grammar School for these details.

HOUSING AND GENERAL SANITARY WORK.

The area of the district is 3052 acres, and there are 5393 inhabited houses.

There were 20 new houses built during the year.

The number of inspections and re-inspections made re housing conditions during the year was 533, and I append table giving the details of the work done under the Housing Acts and the Public Health Acts, also details of other Sanitary work.

HOUSING.

Number of new houses erected during the year:—

(a) Total	... ... ... ... ... ... ... ...	20
(b) As part of a municipal housing scheme	... ...	0

1. *Unfit dwelling houses.*

(2) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925	155.
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation (necessitating closing order)	0

[†]Does not mean in every case a complete inspection, but an inspection regarding some specific defect after complaint or reference by Health Visitors, etc., or otherwise.

(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	155
--	-----

2. *Remedy of Defects without Service of Formal Notices.*

*Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	553
--	-----

3. *Action under Statutory Powers.*

A—Proceedings under Section 3 of the Housing Act, 1925, Town Planning, &c., 1919.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	43
(2) Number of dwelling-houses which were rendered fit:—	
(a) by owners	67
(b) by Local Authority in default of owners ...	0
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	0

B—Proceeding under Public Health Acts.

(1) Number of dwelling-houses in respect of which legal notices were served requiring defects to be remedied	0
(2) Number of dwelling-houses in which defects were remedied:—	
(a) by owners	0
(b) by Local Authority in default of owners ...	0

C.—Proceedings under Section 11, 14 and 15 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of Closing Orders	0
(2) Number of dwelling-houses in respect of which Closing Orders were made	0
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	0

*Defective slop-sink pipes, leaky roofs, defective windows, accumulations of ashes, defective bins, closets, pails, ashpits, drains, gutters, spouts, troughs, etc.

(4) Number of dwelling-houses in respect of which Demolition Orders were made	0
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	0

HOUSING.

There are about 120 overcrowded houses in our town and about 300 back to back houses and about 3308 houses (out of 5390 odd) with only 2 bedrooms.

The majority of our houses are built in rows and they have a common back yard, most of them were built 50 years or more ago and many of them are not in very good repair.

This in a nutshell is the position of Glossop's housing.

It is easy to state facts but hard to find remedies.

For the cases of over crowding in the preface of last year's report I made a very modest suggestion,—that the Council should build at once 10 houses and build more according to demand. This is a prudent and I believe a sensible way of approaching the problem, for we will be dealing with actual cases of hardship and not dealing with unknown quantities; in my preface I gave details of actual cases which I hope every member of our Council has read; that there should be fifteen human beings living in a back to back house with two bedrooms and one living room is disgraceful in a Christian country.

As regards back to back houses I think the policy of the Council should now be to insist on these houses being converted into through houses; in cases of hardship where the displaced tenants cannot find accommodation the Council should build additional houses, but certainly some of the families could find accommodation through building societies and each case should be dealt with on its merits.

The common back yard is another problem, it is not insoluble however, and I think the Council would do well to encourage landlords and tenants to put these back yards into better order by giving prizes for the best kept common yards. Such prizes could be awarded during the Carnival week.

The ideal to be aimed at being to make these back yards a safe and suitable place for children to play in.

The conversion of pail closets and the abolition of open ash pits on a large scale renders this possible.

NOTICES SERVED (INFORMAL OR LEGAL),
1920—1928.

	Notices. Served.	Legal Notices.	No. of defective Houses remedied with or without Notices.
1920	1141	11	1114
1921	1100	120	997
1922	2164	340	1924
1923	946	87	846
1924	609	69	1093
1925	599	92	949
1926	547	51	978
1927	701	44	1213
1928	596	43	801
	—	—	—
	8403	857	9915

By the above figures it will be seen that efforts have been made by the Health Department staff to improve housing conditions and that a large number of defects have been remedied.

SANITARY INSPECTION OF THE DISTRICT.

Number of inspections made during the year ...	13,337
Statutory Notices served	43
Informal Notices served	553
(Details of inspections will be found in the Report of the M.O.H.)	

Factories, Workshops and Workplaces.

1.—INSPECTION.

Premises. (1).	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories 62	313	3	Nil.
(Including Factory Laundries)			
Workshops 63	342	10	Nil.
(Including Workshop Laundries)			
Workplaces ... Bakeries 74	120	0	Nil.
(Other than Outworkers' premises)			
Total ... 199	775	13	Nil.

2.—DEFECTS FOUND.

Particulars. (1)	Number of Defects.			Number of Prosecutions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts :—*				
Want of Cleanli- ness	10	10	--	Nil.
Total	10	10	--	Nil.

* Included in those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

NUISANCES, ACTION TAKEN, AND RESULTS.

	No. of Informal Notices Served by Sanitary Inspector.	No. of Legal Notices Served by Local Authority.	No. of Nuisances Abated, with or without Notice.
<i>Drainage—</i>			
No disconnection of Waste Pipe	—	... —	... —
Defective Waste Pipe, Traps, Inlets, and Drains ...	27	... —	... 25
Drains Obstructed	32	... —	... 32
<i>Closets and Ashpits—</i>			
Defective Privies, Pail Closets and Ashpits	68	... —	... 59
Conversion of Privies into W.C.'s	—	... —	... { 263 under Conversion Scheme
Conversion of Pail Closets into W.C.'s or W.W.C.'s ...	—	... —	... 43
Conversion of Privies into Pail Closets	—	... —	... —
Defective Water Closets ...	43	... —	... 43
Provision of Additional Water Closets	3	... —	... 11
Provision of Portable Ash- bins	217	... —	... 217
Dirty Closets	5	... —	... 5

	No. of Informal Notices Served by Sanitary Inspector.	No. of Legal Notices Served by Local Authority.	No. of Nuisances Abated, with or without Notice.
<i>Other Defects—</i>			
Paving of Courts and Yards...	—		
Roofs, Eaves Spouts, and Down Spouts ...	... 27		
Sinks —		
Insufficient Ventilation	... 28		
Windows... ...	... } 18		
Dampness —		
Water in Cellars —		
Water Supply —		
Overcrowding ...	... 3		
Foul Condition of Houses	... 3		
Offensive Accumulations	... 43		
Animals Improperly Kept	... 3		
Pigsties ...	... 1		
Smoke Nuisances ...	... 3		
Urinals ...	... 1		
Nuisances not specified above	28		
	—	—	—
	553	43	801

	Number on Register.	Inspections Made.	Notices Served.	Nuisances Abated with or without Notice.
Dairies (45), Cowsheds (84) Milkshops (85), and Milkshops (39)	84 in Boro'	654	... 36	... 34
Bakehouses ...	74	120	... 7	... 7
Slaughterhouses in actual use ...	20	945	... 19	... 19
Offensive Trades ...	9	125	... 3	... 3
Common Lodging-houses	2	15	... Chief Constable is Inspector	
	—	—	—	—
	189	1859	65	63

Infected rooms disinfected: Number, 344; Method, S.O.2,
Formaldehyde Spray, and Formaldehyde Gas.

Samples submitted for examination: Water, 3; Milk, 2 to
Analyst, 126 tested on Gerber tester by the Sanitary
Inspector.

COVERING OF REFUSE TIPS.

The instructions and precautions issued by the Ministry of Health in respect to Refuse Tips should be strictly adhered to.

BURNING OF REFUSE.

There is no Destructor in the Borough.

MANURE HEAPS—METHOD OF DEALING WITH.

Every Spring notices regarding prevention of the breeding of flies are sent to all owners of manure pits and midden steads. Action is taken to see that ashpits are emptied regularly.

CHILDREN'S PLAYGROUNDS.

There are five playgrounds in the Borough; it would be a good plan to offer prizes for the best kept backyards and so provide additional playing space near houses.

OPEN SPACES.

There are in addition to the playing fields 2 public Parks and 2 open spaces belonging to the Council.

CLOSET ACCOMMODATION.

The number of Pails in the Borough is approx. 100; W.C's, 3,402; W.W.C's, 479, and Privies 7; including factories and workshops.

Glossop is now a water carriage town. In the year 1920 there were 2513 Pail Closets; in 1922 a start was made by giving a subsidy to owners of conveniences and in 1924 conversion was started on a large scale, the work being done by the Council's men and the owners being charged for materials.

So far as I am aware there are no cases in which a convenience serves for more than 2 houses. In 1920 there were a number of such but they were dealt with.

The Borough Council so far have allowed two houses to use one sanitary convenience, and a large bulk of the houses in the Borough use a W.C. in common with another house.

REFUSE DISPOSAL.

Refuse is removed by the Corporation and is paid for at present through the rates, there is no destructor and the refuse is tipped.

THE MILK SUPPLY.

In the 1923 Report a copy of a card was inserted giving Rules for the Production of Clean Milk which had been given to all the Milk Producers supplying the Borough. This has been amended and distributed again in 1927.

BACTERIOLOGICAL TESTS MILK SAMPLES,
1923 to 1928.

Date.	Number of Samples.	T.B. Positive.	Up to Grade "A."	with T.B. (approx.)	Percentage Affected	Percentage of Grade
					"A" Quality (approx.)	
1923	... 51	... 5	... 21	... 9.8 p.c.	... 41 p.c.	
1924	... 42	... 6	... 20	... 14.3	,,	47 ,,
1925	... 36	... 1	... 22	... 3.0	,,	61 ,,
1926	... 48	... 5	... 32	... 10.4	,,	66 ,,
1927	... 52	... 14	... 29	... 28.0	,,	56 ,,
1928	... 52	... 7	... 37	... 14.0	,,	71 ,,

The above Table shows that now about 70 per cent. of the milk sold in the Borough is of Grade "A" standard.

It will be noticed that there has been an improvement as regards cleanliness (judged by the Grade "A" standard) from 41 per cent. to 70 per cent. since special precautions were taken in 1923 to control the methods of production.

BACTERIOLOGICAL EXAMINATION (MILK).

Details of the result for 1928 are in the Table given below:—

Table Showing Result of Bacteriological Examination of Milk Samples.

No.	Date.	No. of Bacteria per c.c.	B. Coli present in 1/10	1/100	1/1000	Animal Tested for Tubercl Bacilli.
1928						
1.	Jan. 30,	None	Nil	Nil	Nil	No T. Bacilli
2.	,"	8,000	Nil	Nil	Nil	No T. Bacilli
3.	Jan. 31,	688,000	Nil	Nil	Nil	No T. Bacilli
4.	,"	272,000	Nil	Nil	Nil	No T. Bacilli
5.	Feb. 20,	60,000	Nil	Nil	Nil	Control animal died
6.	,"	6,000	Nil	Nil	Nil	Control animal died
7.	,"	140,000	Nil	Nil	Nil	Control animal died
8.	,"	4,000	Nil	Nil	Nil	No T. Bacilli
9.	Feb. 29,	14,000	Nil	Nil	Nil	T Bacilli present
10.	,"	5,000	Positive		T. Bacilli present	
11.	,"	1,000	Nil	Nil	Nil	No T. Bacilli
12.	,"	4,000	Nil	Nil	Nil	No T. Bacilli
13.	May 1,	30,000	Nil	Nil	Nil	No T. Bacilli
14.	,"	16,000	Nil	Nil	Nil	No T. Bacilli
15.	,"	2,000	Nil	Nil	Nil	No T. Bacilli
16.	,"	7,000	Nil	Nil	Nil	No T. Bacilli

No.	Date.	No. of Bacteria per c.c.	B. Coli present in			Animal Tested for Tuber- cle Bacilli.
			1/10	1/100	1/1000	
17.	June 19,	2,000	Nil	Nil	Nil	T. Bacilli present
18.	"	4,000	Nil	Nil	Nil	T. Bacilli present
19.	"	1,000	Nil	Nil	Nil	T. Bacilli present
20.	"	2,000	Nil	Nil	Nil	T. Bacilli present
25.	July 30,	37,000	Nil	Nil	Nil	No T. Bacilli
26.	"	11,000	Present			No T. Bacilli
27.	"	27,000	Nil	Nil	Nil	No T. Bacilli
28.	"	28,000	Nil	Nil	Nil	No T. Bacilli
29.	Sep. 18,	40,000	Present			No T. Bacilli
30.	"	5,000	Present			No T. Bacilli
31.	"	15,000	Present			No T. Bacilli
32.	"	252,000	Nil	Nil	Nil	T. Bacilli present
33.	Oct. 1,	8,000	Nil	Nil	Nil	No T. Bacilli
34.	"	7,000	Nil	Nil	Nil	No T. Bacilli
35.	"	6,000	Nil	Nil	Nil	No T. Bacilli
36.	"	5,000	Nil	Nil	Nil	No T. Bacilli
37.	Oct. 9,	1,072,000	Present			No T. Bacilli
38.	"	10,000	Nil	Nil	Nil	No T. Bacilli
39.	"	1,000	Nil	Nil	Nil	No T. Bacilli
40.	"	14,000	Nil	Nil	Nil	No T. Bacilli
41.	Oct. 31,	7,000	Nil	Nil	Nil	No T. Bacilli
42.	"	5,000	Nil	Nil	Nil	No T. Bacilli
43.	"	10,000	Nil	Nil	Nil	No T. Bacilli
44.	"	150,000	Nil	Nil	Nil	No T. Bacilli
45.	Nov. 7,	4,000	Nil	Nil	Nil	No T. Bacilli
46.	"	3,000	Nil	Nil	Nil	No T. Bacilli
47.	"	65,000	Nil	Nil	Nil	No T. Bacilli
48.	"	15,000	Nil	Nil	Nil	No T. Bacilli
49.	Dec. 5,	57,000	Nil	Nil	Nil	No T. Bacilli
50.	"	27,000	Nil	Nil	Nil	No T. Bacilli
51.	"	15,000	Nil	Nil	Nil	No T. Bacilli
52.	"	480,000	Nil	Nil	Nil	No T. Bacilli
53.	Dec. 18,	124,000	Nil	Nil	Nil	No T. Bacilli
54.	"	118,000	Nil	Nil	Nil	No T. Bacilli
55.	"	107,000	Nil	Nil	Nil	No T. Bacilli
56.	"	141,000	Nil	Nil	Nil	No T. Bacilli

BACTERIOLOGICAL EXAMINATION (ICE CREAM).

Details of the result for 1928 are in the Table given below :—

Table Showing Result of Bacteriological Examination of Ice Cream.

No.	Date.	No. of Bacteria per c.c.	B. Coli present in		
			1/10	1/100	1/1000
21.	July 19, 1928,	1,344,000		Present	
22.	"	Nil	Nil	Nil	Nil
23.	"	800,000		Present	
24.	"	uncountable		Present	

ICE CREAM.

I append details of analysis of samples of Ice Cream taken during the year, the results show that Ice Cream is liable to pollution in a similar way to Milk; this is only as one would expect and the fact that outbreaks of Enteric including Paratyphoid Fever have been caused elsewhere by contaminated Ice Cream confirms our fears.

If Ice Cream can be and actually has been the cause of serious disease in a similar way to Milk it stands to reason that there should be some means for supervising its manufacture and sale and for this purpose I think that persons who manufacture or sell Ice Cream should be controlled in a similar manner to purveyors of Milk and that the Acts and Regulations that apply to the one should apply to the other.

Ice Cream is being consumed in much larger quantities now than hitherto particularly by children and it is only right that they as well as other members of the public should be protected.

I am of opinion that this matter is urgent and that the Ministry of Health should take the necessary steps at the earliest moment.

Ice Cream if pure is a nourishing and wholesome food when partaken of in the proper way and in the proper season and personally I would like to see its sale extended provided we can get a clean supply

It is interesting to note that of the samples analysed by us the sample that was by far the cleanest was made from *sterilised* milk; perhaps this will prove as a hint to those who make and sell Ice Cream of the lines to go on.

MILK.

The table which I append gives details of bacteriological analysis of milk samples.

The results show that 71% of the samples were of Grade A standard. The production of Grade A milk by farmers with non-elaborate cowsheds (many of our local shippings are of an antiquated type) is a practical proposition; it only requires reasonable cleanliness and care which the public have a right to expect and demand.

Regarding Tuberculosis 14% of the samples were found Tubercular.

The moral of this is that the farmers should replace their present breed of cows by one more resistant to the Tubercl Bacillus and I suggest the Kerry; now that small joints are popular I can see no great objection to a small breed of cattle being stocked.

The presence of Tubercl Bacilli in so great a percentage of cows' milk emphasises the need for more sampling.

We do not wish to alarm the public about our supply; our local figures as regards Tuberculosis compare very favourably with other districts. It is advisable however that milk should be brought to the boil then covered and stored in a cool place before using.

As regards the percentage of fats, Gerber testing gave an average of 3.76% fat among 128 samples tested.

This figure is not a bad one.

From consideration of the above facts we must continue our campaign for cleanliness and take greater steps to ensure a Tubercl free supply.

B.—Conditions Prejudicial to the Health of the Borough.

(1)—GENERAL HOUSING CONDITIONS.

The most serious matter is one that is almost impossible to rectify, that is the immense number of houses with only 2 bedrooms (3,308 out of about 5,373 inhabited houses).

This, to some extent, is responsible for overcrowding.

There are in round numbers at least 100 houses overcrowded; see preface. I suggest that the Council build 10 houses as a preliminary.

There are approximately 300 back to back houses.

(2)—HADFIELD WATER SUPPLY.

The Hadfield supply, as mentioned in previous reports, is highly lead soluble and the installation of an efficient plant at the reservoirs for preventing this is urgently required.

It has been proposed to use the water from Ogden Clough only instead of the total water of the Hadfield supply which includes water also from the moors above Tor Side.

The Ogden Clough water has been found to be much freer from organic impurities than the water from Tor Side; it is however highly lead soluble just as the mixed water is and must be treated in a similar way.

The method suggested is,—precipitation by Alumina Ferric followed by treatment by Carbonate of Soda in sufficient quantity to prevent solubility, about several grains to the gallon. This method was found experimentally to be effective by Dr. Thresh.

(3) Better surfaces and more cleansing of the roads both by the County Council and Town Council to prevent the dust nuisance caused by greatly increased motor traffic.

(4) More attention to the ventilation of buildings where public assemblies and entertainments are held.

(5) Improvements at the Isolation Hospital, beginning with the Administration buildings.

(6) The present method of refuse disposal is insanitary and uneconomic.

C.—Noteworthy Occurrences Affecting the Public Health.

The approximate completion of the Pail Conversion scheme.

PUBLIC EDUCATION IN HEALTH.

A very successful Health Exhibition was held in November at the Town Hall. It included sections from the National Association for the Prevention of Tuberculosis and the Dental Board as well as other local exhibits including that of the Maternity and Child Welfare Department.

Films were shown and there was an approximate attendance of 4,000 including 900 school children. The publication "Better Health" was issued during the Exhibition week and is now issued monthly.

The Sixth Annual Report of the Sanitary Inspector for the Year Ended 31st December, 1928.

TO THE MAYOR, ALDERMEN, COUNCILLORS AND BURGESSES OF THE
BOROUGH OF GLOSSOP.

YOUR WORSHIP, LADIES AND GENTLEMEN,

I herewith again present to you my Annual Report of the various works, inspections, etc.; and also details of such inspections as carried out by your Public Health Staff during 1928.

In the first place I am pleased to report that the Assisted Scheme for the Conversion of Pail Closets to the Fresh Water Carriage System can now be said to be completed (there are now only approximately 100 Pail Closets remaining in the Borough); two hundred and sixty three (263) Pail Closets have been converted this year to the Fresh Water Carriage System and I feel certain that within the next few months many of the Pail Closets which are now remaining will be altered to this system. Credit must be given to the late Borough Surveyor (W. A. Mitchell, Esq.) and his staff for the efficient manner in which they have carried out this Conversion Scheme and the admirable way in which they dealt with the many difficult problems associated therewith. I find that the saving on Health Estimates, haulage, mixing and disposal of night soil (abolition of Pail System) amounts to over £1,000 per annum; so this proves that it was a wise policy on the part of the Council (apart from health reasons) to go forward and complete the Scheme. There is no doubt whatever that the health of the inhabitants of the Borough especially the infants has benefited greatly by the completion of this Water Carriage system. There has been no serious shortage of water although approximately 2,300 Fresh Water Closets have been put into service during the last five years. This is probably accounted for by the fact that many old leaky water mains have been taken out and replaced by new sound cast iron ones. Further, many leakages have been found in service pipes and these having now been repaired and made good have greatly conserved our Public Water Supply.

We are still slowly discontinuing using ashpits; these are being replaced by galvanized ashbins. Nearly all our few remaining ashpits (which now only number 80) are roofed over, but I hope in the near future to persuade the owners of these to adopt galvanized ashbins in lieu thereof. The bins are far superior to the old out-of-date ashpits and certainly help to minimise the

Fly Peril in Summer Weather; as the contents of the ashbins are cleared regularly every week. Ten ashpits have been dismantled during 1928 and ashbins substituted therefor.

SCAVENGING (HOUSE AND TRADE REFUSE).

This is still under the control and supervision of the Borough Surveyor's Department. We have now approximately 100 Pail Conveniences, 80 Ashpits, 3,359 Ashbins and only 7 Privy Middens (these latter are situated in the outlying districts where we have no sewers). The contents of the Ashbins and Ashpits are removed in horse drawn vehicles to the various dumps (tips). The contents of the Pails are removed regularly by Contractors or Farmers and are used for agricultural purposes. I must stress the fact that the Corporation ceased emptying Pails on July 31st, 1928; a very marked event in the affairs of Public Health. As mentioned in my previous reports we have no Destructor Plant. The Health Committee will very soon be faced with the grave problem of providing several new Tips whereon to deposit the household refuse. One or two of the present Tips, notably Surrey Street, are nearly "filled-in" with the "levels" originally set out. Under the Ministry of Health's instructions of July, 1922, regarding Refuse Tips I am of the opinion that extreme care will have to be taken in deciding upon suitable sites for such Tips. The question of the distance of haulage must have a great bearing on where the sites shall be as a "long haul" adds very considerably to cartage costs.

SANITARY INSPECTIONS OF THE DISTRICT.

Number of Inspection made	... ... ... ...	13,337
Statutory Notices Served	... ... ... ...	43
Informal Notices	... ... ... ...	553
See report of M.O.H. for details.		

DAIRIES, COWSHEDS AND MILKSHOPS.

The number of Milk Sellers registered and whose Farms or premises are situated in the Borough is 84. Of these 39 are milkshops, and of this number 38 are registered as retailers of Bottled Sterilised Milk.

We have now in the Borough (registered) 45 Farm Dairies, 85 Cowsheds and 45 Farms. The total number of Purveyors of Milk who are registered with the Council but whose Farms are situated outside the Borough Boundary is 52. This shows that there are more milk sellers retailing milk here whose buildings, premises, cowsheds and dairies are out of my control than those whose cowsheds, dairies, etc., are situated inside the Borough Area and are thus under the control of your Health Department. As stated in last year's report this is the principal reason why I concentrate upon sampling the milk from these

"outsiders" more than from Farmers who reside in the Borough. These samples are taken so that it can be seen whether or not the milk is free from harmful Bacilli especially "Tubercle Bacilli." Personally I hope that in the near future legislation will be made so that it will insist upon the regular sampling of milk for these tests at the places of production, namely, Farms. I am sorry to say that in many districts the sampling of milk for testing for Tubercle Bacilli seems to be the duty of no one. I am proud to say that here (Borough of Glossop) we do try to take a good average number of samples annually as to my mind it is only fair to the Farmer and the General Public alike to ensure that all milk is free from Tubercle Bacilli; in fact several Farmers have thanked me personally (although they have suffered the loss of an animal) for taking samples and informing them that Tubercle Bacilli had been found in their milk. This year 654 visits have been made to the various Farms, Farm Dairies and Milkshops in the Borough; 36 Notices requiring remedying of defects have been served. Informal Notices under the Milk and Dairies Order, 1926, article 25, pointing out the requirements as to Floors, Drainage Channels, etc., have been sent to all occupiers of the Farms situated in this Borough. I am very pleased to say that several of the Farmers have already completed the alterations and carried out the requirements as set out in the Order.

There is one little point respecting these alterations to which I would like to draw attention and that is: the Heel Stone of the Cowbed is far better "rounded off" than left "Sharp and Square." I have noticed several cows that were cut on the hocks by dropping down heavily on the sharp concrete edge of the "bed." I hope to inspect all the Farms during the next few months and to interview the occupiers regarding the matter of alterations (where necessary) which are needed in respect to the D.C. and M. Orders, 1926, all sections which have now become operative. I trust that all Farmers and Employees will again try and improve the cleanliness of the Cowsheds, Cows, Utensils, etc., and do all in their power to produce a Good, Clean, Pure, Wholesome "Raw Milk." As I have stated for several years now it is mostly "methods which produce a clean Milk" "not fancy palatial Buildings."

MILK SUPPLY.

Following my usual procedure many samples of Milk have been purchased from various Farmers and Milk Vendors. During this year 128 Samples have been obtained; 2 of these have been forwarded to the Public Analyst (J. White, Esq., Derby) and the remainder (126) were tested by your Inspector on the Gerber Tester. The average milk fats on the 128 samples was 3.76%. This is an excellent average and is very creditable to the Farmers and shows that the quality of milk

produced and sold in this area is good. The standard of cleanliness is still being maintained as a perusal of the Bacteriologist's figures (vide M.O.H. Report) will show. Many samples have been tested for cleanliness by your Sanitary Inspector using a "Minit" Sediment Tester. The cotton wool discs afterwards being forwarded to the milk vendor along with the necessary comments and advice.

As reported previously there are still a few Farmers who do not use as much care and trouble as they might in dealing with the milk they sell and I am afraid that if they continue to "carry on" in this neglectful manner drastic steps will be taken to compel them to improve their methods. The average class of milk sold in this area is good and compares very favourably indeed with a Grade "A" Milk, although sold at ordinary milk price. I must commend most of the Vendors for this. I would again stress the point that all milk should be promptly removed from the vicinity of the cowsheds and then be thoroughly cooled. I am aware that the D.C. and M Order, 1926, allows the omission of this procedure if the Farmer sells the morning and evening's milk (separately) (two journeys per day) but as the milk retains its sweetness so much longer it is well worth the trouble to cool both milkings. The total number of samples sent from here to the Bacteriologist at Derby was 4 of Ice cream, and 52 of Milk. Regarding the latter these are tested for the Count, *i.e.*, number of bacteria per c. c. also for Bacillus Coli and the presence or otherwise of Tubercle Bacilli. The results show that out of this number 7 were found to contain Tubercle Bacilli. This gives an average of about 14% (an improvement on the results of 1927). A rather significant fact is here found for in 31 samples of milk purchased which had been produced in the Borough not a single trace of Tubercle Bacilli was found. All the infected milk was produced on Farms situate outside the Borough (Rural Districts), a condition of things which should be remedied. As previously mentioned plenty of milk sold here is up to or over Grade "A" Standard and from a perusal of the Bacteriologists figures I find that this year 71% of the samples tested have been over this "Standard." This proves what can be accomplished by "methods." All cases of milk which are found to contain Tubercle Bacilli are notified to the County M.O.H., the Chief Constable and the Veterinary Surgeon. They deal with the affected animal or animals as directed by the Tuberculosis Order of 1925. In my opinion the final disposal of the carcases of infected animals is far from satisfactory and I am pleased to know that the County M.O.H. (Dr. W. M. Ash) is dealing with the subject I trust that in the near future all Local Authorities will be compelled to take samples of milk and have them tested by a Bacteriologist to see whether or not the Public are being supplied with a Good, Clean, Pure Raw Milk, and that such milk is free from Tubercle Bacilli. It is very unfair that an Authority such as ours should be saddled with the trouble and expense of sampling and testing milk produced in outside areas.

FOOD AND DRUGS.

Under these Acts and Orders 62 samples have been from various vendors and forwarded to the Public Analyst (J. White, Esq.). These foods, etc., consisted of 14 different articles and comprised Jams 8, Milk 2, Butter 8, Sausages 8, Cream 2, Condensed Milk 5, Preservative Colouring 1, Margarine 4, Cheese 4, Ground Almonds 8, Dried Milks 7, Mincemeat 1, Chocolates 1, Boiled Sweets 3. There were only 3 samples which did not comply with Acts or Orders and these were: 1 of Sausages, which contained Boric Acid, 1 of Cream which also contained Boric Acid, and 1 of Preservative Colouring which contained an excessive amount, *i.e.*, 56% of Boric Acid. Prosecutions were not instituted in any of these cases but the vendors of the articles were warned about the offence. The Manufacturer of the Sausages had been using the Preservative Colouring in the Sausage Meat so there could be no doubt as to where the Boric Acid originated from. Of course this procedure was immediately stopped and the Sausages he now makes are free from any trace of preservatives. The vendor of the cream was not aware that any Boric Acid had been added, but it was found out that one of his employees had used a little of this Preservative during the hot weather. I am pleased to say that all the milk samples tested were found to contain milk fats up to or over the so-called "Standard." In fact the average milk fats on 128 samples was 3.76%. This result is the best that we have had during the last twenty-five years and the Farmers are to be commended for it. Three samples of drinking water have also been obtained and sent away to be analysed and examined for Plumbo Solvency, Bacteria, Bacillus Coli, etc.

RATS AND MICE (DESTRUCTION) ACTS.

Infestations by these pests seems to be fairly well under control in this Borough. Shaw Lane Tip still continues to harbour a fair colony of rats. Owing to the fact that all the bin and trade refuse from the Hadfield Ward is "dumped" here the rodents are becoming rather shy of taking poison baits as they have free access to food (garbage, etc.), but I do not think their numbers are increasing. We treat this Tip regularly with various poisons mostly Rodine and Ratox, so probably this allows us to somewhat control the natural increase of the rat tribe. Owing to the disturbance of house drains and the abolition of the old stone sewers many domestic premises have received a few visits from the pests. Poison baits have been put down for a few nights and this usually clears the vermin. The Tips, Market and Market Hall are baited regularly with one or other of the various proprietary Rat Poisons. By this method I find the results are better than making a great "plunge" once a year, *i.e.*, Rat Week.

MEAT AND FOODS INSPECTIONS.

During this year the following food has been condemned as being unsound, diseased or otherwise unfit for human consumption:—

For Tuberculosis 7 Bovine Forequarters, 3 Bovine Hindquarters, 3 Bovine Carcasses and Organs, 60 Sets Lungs, 3 Udders, 5 Swine Carcasses and Organs, 33 Swine Heads, 8 Swine Plucks.

For Hydatid Cysts and Cirrhosis 28 Bovine Livers, 77 Sheep Livers (Flukes), 5 Swine Livers, 2 Swine Carcasses (dropsical).

For Decomposition, Bone Taint, etc.

231 lbs. Chilled or Frozen Beef.

110 lbs. English Beef.

15 Carcasses of Sheep (suffocated).

24 lbs. Ham, Bone tainted.

6 lbs. Corned Beef, decomposed.

I must again thank the Butchers for their assistance in notifying to the Health Department any suspected cases of disease or anything abnormal in the carcasses of the animals they were slaughtering or "dressing." The quality of meat sold by our local Butchers is good. Many inspections have been made to premises (other than slaughterhouses) where food such as Puddings, Sausages, Brawn, etc., were being "made up" or "prepared." All were found to be in good order and clean.

SLAUGHTERHOUSES.

We have still 20 slaughterhouses in the Borough. Of this large number 3 are licensed and 17 are registered. The largest amount of slaughtering takes place on Sundays and Mondays. Regular inspections and supervision is made. I am pleased to say that now all animals are stunned with the Captive Bolt Pistol before bleeding. I must congratulate the majority of the Butchers for the manner in which they agreed to this somewhat drastic change. Naturally one or two objected strongly but I am convinced that this method must save the animals which are slaughtered for human food a tremendous amount of suffering. On humane grounds alone I am sure this was a right and proper procedure to adopt. Whilst on the subject I would advise the Butchers not to leave the Bolt Pistol in the damp atmosphere of the slaughterhouse, but to remove them immediately to some safe place (where they can be kept dry) after the day's slaughtering is completed. Treat the Bolt Pistol with the same care as a Shot Gun using the oil recommended by the Makers, and then

I think the failures will be nil. There have been again a few cases in which the renewal of limewashing of the slaughterhouses (at least four times a year) has been neglected. I hope the Butchers will bear this in mind and carry out the regular re-limewashing.

BAKEHOUSES AND BAKERIES.

There are 74 Bakehouses or Bakeries on our Register. In 1900 we had only 38 so there must be less home baking now. 120 visits of inspection have been made and 7 neglects to re-limewashing were noted. These were immediately remedied. The majority of these Bakehouses are kept very clean and the employees work under good conditions.

OFFENSIVE TRADES.

There are 9 places registered as Offensive Trades. These are mostly Tripe Dressing Establishments and 1 Soap and Size Works. 125 visits were made during 1928 to these places and 3 neglects to re-limewash were found, these, of course, were immediately dealt with.

FACTORIES AND WORKSHOPS.

The numbers of Factories and Workshops registered with the Public Health Department are respectively 62 and 63. The visits of inspection to these places were 313 to the Factories and 342 to the Workshops. There were again a few neglects to lime-wash, 13 in number. These have now been remedied.

SMOKE NUISANCES.

The unfortunate position of the Cotton Trade has "held up" again the schemes which several Mill Owners had contemplated regarding Auto Stokers, etc., for the boilers supplying steam for their Mills. I hope that when the trade improves these much needed alterations will be carried out. The inhabitants of the Higher part of Whitfield are now free from the smoke nuisance which they have had for many years for the Bleach Works chimney has now been dismantled and the new Power Plant does not create any smoke nuisance. It is a pleasure to see this part of the Borough so free from smoke created by boiler furnaces.

SEWERS, DRAINS, BUILDINGS, &c.

Through the kindness of our late Borough Surveyor (W. A. Mitchell, Esq.) I can again give the following information regarding works carried out or supervised by his Department.

NEW BUILDINGS ERECTED.

20 Houses and Bungalows.

1 Garage.

TEMPORARY BUILDINGS.

12 Garages

4 Other Buildings.

ADDITIONS AND ALTERATIONS.

12 Lots of additions or alterations to various properties.

1 Works extension.

39 additional W.C.'s provided including 28 W.C.'s in connection with the new buildings erected.

263 Pail Closets converted to W.C.'s.

OLD SEWERS REPLACED BY SANITARY PIPES.

Various places, 221 lineal yards.

Several old stone sewers have been replaced with earthenware Sanitary pipes.

NEW SEWERS LAID.

Norfolk Street Sewer Extension ...	387	lineal yards.
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Hadfield Cross	80	"	"
------------------------------------	----	---	---

Pyegrove	173	"	"
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DISINFECTION.

The total number of rooms dealt with during 1928 was 344. The methods adopted are as those used during the last nine or ten years, *i.e.*, Formaldehyde, Formic Acid Gas, and in a few cases S.O.2 (Sulphur Dioxide). A number of beds and mattresses have been destroyed by burning (after fatal cases of illness such as Cancer, Tuberculosis, etc.). We are still without a steam disinfecter.

In conclusion, I must say that I am pleased to see that our Town is now amongst those Boroughs who have adopted the Water Carriage System throughout, and I trust that this wise policy of the Council will be appreciated by the inhabitants. I wish to thank the Chairman (Councillor R. Sellers) and all the members of the Health Committee and also the various Borough officials for their ready help and kind assistance so freely given at all times.

I am, your obedient servant,

HARRY DANE, Cert. R.S.I., M.S.I.A.,

Sanitary Inspector,

Food and Drugs Inspector,

Meat Inspector,

Dairies, Cowsheds and Milkshops Inspector.

March 21st, 1929.

